

**Legalized Games of Chance Control Commission**  
**Instructions**  
**Initial Affidavit and Application for Biennial Registration**

Enclosed are the materials to apply for registration as an organization qualified to conduct games of chance. Please take a moment to review the instructions below:

Failure to follow instructions and submit all of the required documentation will result in delays and/or rejection of the application.

- ◆ The fee of \$50.00 is non-refundable and nontransferable. The check must be made payable to "Legalized Games of Chance Control Commission".
- ◆ The application is to be completed in its entirety by an elected officer (as defined by your bylaws) of your organization.
- ◆ On the line provided for "Telephone number," please provide the number of the Organization or the number of a contact person who is able to answer questions with regard to the application.
- ◆ Unless your organization is established for religious purposes or is associated directly with an organization established for religious purposes, registration with the Division of Consumer Affairs Charities Registration Section is most likely required. If you have questions regarding registration with the Division of Consumer Affairs' Charities Registration Section, please call (973) 504-6215.
- ◆ The completed application and affidavit together with the fee must be returned to the Legalized Games of Chance Control Commission at P.O. Box 46014, Newark, NJ 07101.

**Affidavit**

Enter the county in which the Organization is located.

- Section 1. Print the name of the **elected officer** filling out the application.
- a. Print the name of the Organization.
  - b. Print the title of the office held by the person filling out the form.
- Section 2. Record the correct mailing address of the Organization
- Section 3. List the names, titles, addresses and dates of birth of all officers and trustees of the Organization. Use a separate sheet of paper if additional space is required. (Note: officers and trustees must be at least 18 years of age.)
- Section 4. Please check which option applies to your organization:
- [ ] If the organization has been incorporated in the state of New Jersey or in the county where the organization is located, please attach:
    - A. A true copy of the organization's articles of incorporation. A true copy will bear the stamp of the agency with which it was filed, either the county, the Secretary of State, or the Department of the Treasury. Please call the Commercial Recording and Business Services line (609-292-9292) for help in obtaining a true copy of your articles of incorporation, if you need help.

B. If the organization has amended its articles of incorporation, submit true copies of any and all amendments to the articles of incorporation bearing the stamp of the county, the Secretary of State or the Department of the Treasury; and

C. A current copy of the organization's constitution and by-laws.

[ ] If the organization is not incorporated, indicate whether or not it is officially registered as an association. If registered, indicate the municipality and/or county in which the association is registered. Please attach:

◆ A current copy of the organization's constitution and by-laws.

[ ] If the organization is not formally incorporated or associated, please attach:

◆ A current copy of the organization's constitution and by-laws.

Section 5. Indicate whether or not your chapter, lodge, club or organization is chartered from a national or state organization. If the organization is chartered, include the full name, address and telephone number of the parent organization and attach:

A. A true copy of the parent organization's articles of incorporation bearing a stamp indicating that they have been filed with the proper agency in the state of incorporation;

B. A current copy of the parent organization's constitution and by-laws; and

C. A copy of the charter issued to your organization by the parent organization or a letter from the parent organization stating that your organization is a member in good standing.

Section 6. Attach a list of the names and addresses of all individuals who are bona fide active members of the applicant organization, or, in the case of a non-membership organization, a list of names and addresses of volunteers. **Note: the list must include at least 25 individual adults who are residents of New Jersey in order for the organization to qualify.**

Section 7. State what will happen to the remaining assets of the organization if the organization should be dissolved. Indicate where that provision is located in the organization's articles of incorporation, constitution or by-laws, or the constitution and bylaws of the parent organization.

Section 8. Complete and attach the enclosed financial statement form for the organization for the past 12 months. Include all sources of income and items of expense.

Section 9. Sign the form in the presence of a notary public or an attorney. The signature must be of the person indicated at line #1 of the Affidavit.

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